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Annual ministerial review: implementing the internationally agreed goals and commitments in regard to global public health

Statement submitted by American Psychological Association; International Association of Applied Psychology; International Association of Schools of Social Work; International Council of Psychologists; International Federation of Social Workers; International Society for Traumatic Stress Studies; International Union of Psychological Science; Soroptomist International; World Association for Psychosocial Rehabilitation; World Council for Psychotherapy; World Federation for Mental Health; and Zonta International, non-governmental organizations in consultative status with the Economic and Social Council

The Secretary-General has received the following statement, which is being circulated in accordance with paragraphs 30 and 31 of Economic and Social Council resolution 1996/31.

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Statement*

We, the NGO Committee on Mental Health, working under the auspices of the Conference of Non-Governmental Organizations in Consultative Relationship with the United Nations Economic and Social Council (CoNGO), are committed to the promotion of mental health, psychological and societal well-being, the prevention and treatment of mental illness, trauma and emotional distress, and the improvement in the delivery and quality of mental health services through advocacy and education at the United Nations.

Mental health is an integral part of health and a human rights. The importance of maintaining full mental health for all people is recognized by the World Health Organization (WHO) in its Constitution, stating that "health is a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity." The International Covenant on Economic, Social, and Cultural Rights (ICESCR, article 12) obliges member states to respect, promote, and fulfil the "right of everyone to the enjoyment of the highest attainable standard of physical and mental health", through the implementation of domestic mental health law and policy, as well as the provision of technical, administrative and budgetary resources.

We note with deep concern that:

- Mental disorders are a significant contributor to the global burden of disease and account for 12% of disability-adjusted life years (DALYs), which is more than TB (2.2 percent), Malaria (2.2 percent) and HIV/AIDS (3.8 percent) combined.
- Depression alone was the third leading contributor to the global burden of disease (4.3%) in 2004 and is projected to reach first place in 2030. Women represent the population most at risk.
- There is a vast shortage in mental health professionals and services in low- and middle income countries.
- As a result, it is estimated that over 75 percent of individuals with mental health problems in many low income countries have no access to mental health services.

Mental dysfunction and disorders impact on the achievement of the Internationally Agreed Development Goals, including the MDGs:

- Mental illness disrupts essential areas of educational, vocational, family and community functioning.
- The WHO and the World Bank have recognized that mental health problems can significantly impair economic growth, social progress, and human development.
- Mental disorders are risk factors for various human development and public health concerns such as poverty, unemployment, poor educational achievement, social marginalization, violence, suicide, non-compliance with medical regimens, and physical health problems.

* Issued without formal editing.

Yet, mental health is largely missing from the global public health agenda and remains one of the most under-funded areas of health care, especially in low-income countries.

We recommended the following action priorities to be implemented by multilateral agencies, donors, and governments:

- Increase political will and provide economic resources to address mental health problems.
- Develop a policy and legislative infrastructure and strengthen health systems for the delivery of mental health and psychosocial services, with particular attention to women and children.
- Integrate mental health, trauma and psychosocial programming in existing relief and human development efforts.
- Build capacity for addressing mental health and trauma issues by strengthening human resources and training local professionals and paraprofessionals, including social workers. Integrate mental health with existing community healthcare services such as primary care.
- Scale up culturally sensitive, evidence-based, and cost-effective intervention packages for mental disorders as outlined in the WHO Mental Health Gap Action Program.
- Create public-private partnerships to address the shortage of resources such as the availability of psychotropic medications in low-resource settings.
- Include strong assessment, monitoring, and evaluation and research components in all policy and programming efforts, in order to monitor progress and to build the evidence base for best practices.